THE BLACK ARCHIVES, HISTORY AND RESEARCH FOUNDATION OF SOUTH FLORIDA, INC.

CHAPMAN HOUSE SUPPORT FORM

YES, I want to help the Chapman House. I want to donate my services, materials or money to its programs. Please put me on your mailing list.

PLEASE PRINT

(Mr. Mrs. Miss) _____
(First name) (M.I.) (Last name)

Mailing Address _____ Apt._____

_____ _____
(City) (State) (Zip Code)

Daytime telephone( )_____ Evening telephone( )_____

My check or money order for

___$10 ___$25 ___$50 ___$100 ___$500 ___$1,000 ___other $_____ is enclosed.

DO NOT SEND CASH. Make checks payable to: The Black Archives Foundation. (Checks returned by the bank cost an additional $15.00)

I also wish to participate in: _____Folklife Folktales Center
_____Masks Around the World
_____Oral History Program
_____Other (Please explain)_____
(See Wish List on the back)

~Wish List~

We would greatly appreciate your help in obtaining the following items:

Flowers for window sill gardens
Computer with printer and CD ROM reader
Micorfilm reader with printing capabilities
Model T Ford (an artifact to park next to house)
Fax machine
Copy machine
Concrete foundation for security trailer (estimate cost $15,000)
VCR and television monitor